

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10728710

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
4						
5		3				
6		3				
7		1				
8		3				
9		3				
10		1				
11		1				
12		1				
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TOTAL IND.	2					
TOTAL DEP.	33					
TOTAL CLAIMS	35					

	IND	DEP	IND	DEP	IND	DEP
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